



Department of Medical Assistance Services  
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[www.dmas.virginia.gov](http://www.dmas.virginia.gov)

# MEDICAID MEMO

TO: All Hospitals and Managed Care Organizations Participating in the Virginia Medical Assistance Program

FROM: Cynthia B. Jones, Director  
Department of Medical Assistance Services (DMAS)

MEMO: Special  
DATE: June 21, 2016

SUBJECT: Enhanced Ambulatory Patient Group (EAPG) for Outpatient Hospital Services; New Weights, Base Rates, and EAPG Grouper Version for Claims Payment - Effective July 1, 2016

The purpose of this memorandum is to inform providers of the establishment of new weights, base rates as well as the use of an updated Enhanced Ambulatory Patient Group (EAPG) grouper version, for outpatient hospital services. DMAS began reimbursing Outpatient Hospital facilities in accordance with the EAPG reimbursement methodology on claims with dates of service beginning January 1, 2014. (See the Medicaid Memorandum dated November 8, 2013, "Enhanced Ambulatory Patient Group (EAPG) for Outpatient Hospital Services.")

In accordance with emergency regulations, DMAS is updating the weights and rebasing hospital base rates for the EAPG reimbursement methodology. In addition, DMAS is updating the EAPG grouper version for this reimbursement. Specifically, DMAS will be using Version 3.10 of the EAPG grouper as well as Version 3.10 of the national weights developed by 3M with modifications for series billed claims. The new base rates, which DMAS calculated using these Version 3.10 products, should result in total expenditures that reimburse on average 76 percent of cost in the base year (cost reports ending in state fiscal year 2014) adjusted for lower reimbursement for emergency room triage claims and the DMAS lab fee schedule. The base rates include inflation for FY14 (partial year for some hospitals), FY15, FY16 and 50% of inflation for FY17. The transition from the prior cost-based methodology to the EAPG methodology is complete and the rates are based on 100% EAPG. The net impact of rebasing is a 0.1% increase in reimbursement compared to no rebasing. No budget neutrality adjustment was applied because of the rebasing.

The EAPG weights and base rates are available on the DMAS web site at [www.dmas.virginia.gov](http://www.dmas.virginia.gov). This is the hospital official notification. Click the following links: Provider Services, Rate Setting Information, Outpatient Hospital EAPG, Rates & Weights.

To contact 3M for more information about EAPG software, please call 800-367-2447 or use the following link: [www.3MHIS.com](http://www.3MHIS.com). The 3M April software release includes Virginia EAPG Version 3.10 that will be effective for dates of service on or after July 1, 2016.

The new EAPG weights and base rates will be effective for claims with dates of service on or after July 1, 2016.

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## **COMMONWEALTH COORDINATED CARE**

Commonwealth Coordinated Care (CCC) is a managed care program that is coordinating care for thousands of Virginians who have both Medicare and Medicaid and meet certain eligibility requirements. Please visit the website at [http://www.dmas.virginia.gov/Content\\_pgs/altc-home.aspx](http://www.dmas.virginia.gov/Content_pgs/altc-home.aspx) to learn more.

## **MANAGED CARE PROGRAMS**

Many Medicaid individuals are enrolled in one of the Department's managed care programs (Medallion 3.0, CCC and PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan/PACE provider may utilize different prior authorization, billing, and reimbursement guidelines than those described for Medicaid fee-for-service individuals. For more information, please contact the individual's managed care plan/PACE provider directly.

Contact information for managed care plans/PACE providers can be found on the DMAS website for each program as follows:

- Medallion 3.0: [http://www.dmas.virginia.gov/Content\\_pgs/mc-home.aspx](http://www.dmas.virginia.gov/Content_pgs/mc-home.aspx)
- Commonwealth Coordinated Care (CCC): [http://www.dmas.virginia.gov/Content\\_pgs/mmfa-isp.aspx](http://www.dmas.virginia.gov/Content_pgs/mmfa-isp.aspx)
- Program of All-Inclusive Care for the Elderly (PACE):  
[http://www.dmas.virginia.gov/Content\\_atchs/lrc/PACE%20Sites%20in%20VA.pdf](http://www.dmas.virginia.gov/Content_atchs/lrc/PACE%20Sites%20in%20VA.pdf)

## **VIRGINIA MEDICAID WEB PORTAL**

DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, payment status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: [www.virginiamedicaid.dmas.virginia.gov](http://www.virginiamedicaid.dmas.virginia.gov). If you have any questions regarding the Virginia Medicaid Web Portal, please contact the Xerox State Healthcare Web Portal Support Help desk toll free, at 1-866-352-0496 from 8:00 a.m. to 5:00 p.m. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

## **KEPRO PROVIDER PORTAL**

Providers may access service authorization information including status via KEPRO's Provider Portal at <http://dmas.kepro.com>.

## **"HELPLINE"**

The "HELPLINE" is available to answer questions Monday through Friday from 8:00 a.m. to 5:00 p.m., except on holidays. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.